



General Assembly

## ***Amendment***

***February Session, 2014***

**LCO No. 5199**

**\*SB0041705199SD0\***

Offered by:

SEN. GERRATANA, 6<sup>th</sup> Dist.

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To: Subst. Senate Bill No. **417**

File No. 458

Cal. No. 300

### ***"AN ACT CONCERNING THE PROVISION OF PSYCHIATRIC AND SUBSTANCE USE TREATMENT SERVICES."***

1 Strike everything after the enacting clause and substitute the  
2 following in lieu thereof:

3 "Section 1. Section 19a-490 of the 2014 supplement to the general  
4 statutes is repealed and the following is substituted in lieu thereof  
5 (*Effective October 1, 2014*):

6 As used in this chapter and sections 17b-261e, 38a-498b and 38a-  
7 525b:

8 (a) "Institution" means a hospital, short-term hospital special  
9 hospice, hospice inpatient facility, residential care home, health care  
10 facility for the handicapped, nursing home, rest home, home health  
11 care agency, homemaker-home health aide agency, mental health  
12 facility, assisted living services agency, substance abuse treatment  
13 facility, outpatient surgical facility, outpatient clinic, an infirmary

14 operated by an educational institution for the care of students enrolled  
15 in, and faculty and employees of, such institution; a facility engaged in  
16 providing services for the prevention, diagnosis, treatment or care of  
17 human health conditions, including facilities operated and maintained  
18 by any state agency, except facilities for the care or treatment of  
19 mentally ill persons or persons with substance abuse problems; and a  
20 residential facility for persons with intellectual disability licensed  
21 pursuant to section 17a-227 and certified to participate in the Title XIX  
22 Medicaid program as an intermediate care facility for individuals with  
23 intellectual disability;

24 (b) "Hospital" means an establishment for the lodging, care and  
25 treatment of persons suffering from disease or other abnormal physical  
26 or mental conditions and includes inpatient psychiatric services in  
27 general hospitals;

28 (c) "Residential care home", "nursing home" or "rest home" means an  
29 establishment that furnishes, in single or multiple facilities, food and  
30 shelter to two or more persons unrelated to the proprietor and, in  
31 addition, provides services that meet a need beyond the basic  
32 provisions of food, shelter and laundry;

33 (d) "Home health care agency" means a public or private  
34 organization, or a subdivision thereof, engaged in providing  
35 professional nursing services and the following services, available  
36 twenty-four hours per day, in the patient's home or a substantially  
37 equivalent environment: Homemaker-home health aide services as  
38 defined in this section, physical therapy, speech therapy, occupational  
39 therapy or medical social services. The agency shall provide  
40 professional nursing services and at least one additional service  
41 directly and all others directly or through contract. An agency shall be  
42 available to enroll new patients seven days a week, twenty-four hours  
43 per day;

44 (e) "Homemaker-home health aide agency" means a public or  
45 private organization, except a home health care agency, which

46 provides in the patient's home or a substantially equivalent  
47 environment supportive services which may include, but are not  
48 limited to, assistance with personal hygiene, dressing, feeding and  
49 incidental household tasks essential to achieving adequate household  
50 and family management. Such supportive services shall be provided  
51 under the supervision of a registered nurse and, if such nurse  
52 determines appropriate, shall be provided by a social worker, physical  
53 therapist, speech therapist or occupational therapist. Such supervision  
54 may be provided directly or through contract;

55 (f) "Homemaker-home health aide services" as defined in this  
56 section shall not include services provided to assist individuals with  
57 activities of daily living when such individuals have a disease or  
58 condition that is chronic and stable as determined by a physician  
59 licensed in the state of Connecticut;

60 (g) "Mental health facility" means any facility for the care or  
61 treatment of mentally ill or emotionally disturbed persons, or any  
62 mental health outpatient treatment facility that provides treatment to  
63 persons sixteen years of age or older who are receiving services from  
64 the Department of Mental Health and Addiction Services, but does not  
65 include family care homes for the mentally ill;

66 (h) "Alcohol or drug treatment facility" means any facility for the  
67 care or treatment of persons suffering from alcoholism or other drug  
68 addiction;

69 (i) "Person" means any individual, firm, partnership, corporation,  
70 limited liability company or association;

71 (j) "Commissioner" means the Commissioner of Public Health;

72 (k) "Home health agency" means an agency licensed as a home  
73 health care agency or a homemaker-home health aide agency;

74 (l) "Assisted living services agency" means an agency that provides,  
75 among other things, nursing services and assistance with activities of

76 daily living to a population that is chronic and stable; [and]

77 (m) "Outpatient clinic" means an organization operated by a  
78 municipality or a corporation, other than a hospital, that provides (1)  
79 ambulatory medical care, including preventive and health promotion  
80 services, (2) dental care, or (3) mental health services in conjunction  
81 with medical or dental care for the purpose of diagnosing or treating a  
82 health condition that does not require the patient's overnight care; and

83 (n) "Multi-care institution" means a hospital, psychiatric outpatient  
84 clinic for adults, free-standing facility for the care or treatment of  
85 substance abusive or dependent persons, hospital for psychiatric  
86 disabilities, as defined in section 17a-495, or a general acute care  
87 hospital that provides outpatient behavioral health services that (A) is  
88 licensed in accordance with chapter 368v, (B) has more than one  
89 facility or one or more satellite units owned and operated by a single  
90 licensee, and (C) offers complex patient health care services at each  
91 facility or satellite unit.

92 Sec. 2. Section 19a-493 of the 2014 supplement to the general statutes  
93 is repealed and the following is substituted in lieu thereof (*Effective*  
94 *October 1, 2014*):

95 (a) Upon receipt of an application for an initial license, the  
96 Department of Public Health, subject to the provisions of section 19a-  
97 491a, shall issue such license if, upon conducting a scheduled  
98 inspection and investigation, the department finds that the applicant  
99 and facilities meet the requirements established under section 19a-495,  
100 provided a license shall be issued to or renewed for an institution, as  
101 defined in [subsection (d), (e) or (f) of] section 19a-490, only if such  
102 institution is not otherwise required to be licensed by the state. If an  
103 institution, as defined in subsections (b), (d), (e) and (f) of section 19a-  
104 490, applies for license renewal and has been certified as a provider of  
105 services by the United States Department of Health and Human  
106 Services under Medicare or Medicaid programs within the  
107 immediately preceding twelve-month period, or if an institution, as

108 defined in subsection (b) of section 19a-490, is currently certified, the  
109 commissioner or the commissioner's designee may waive on renewal  
110 the inspection and investigation of such facility required by this  
111 section and, in such event, any such facility shall be deemed to have  
112 satisfied the requirements of section 19a-495 for the purposes of  
113 licensure. Such license shall be valid for two years or a fraction thereof  
114 and shall terminate on March thirty-first, June thirtieth, September  
115 thirtieth or December thirty-first of the appropriate year. A license  
116 issued pursuant to this chapter, unless sooner suspended or revoked,  
117 shall be renewable biennially (1) after an unscheduled inspection is  
118 conducted by the department, and (2) upon the filing by the licensee,  
119 and approval by the department, of a report upon such date and  
120 containing such information in such form as the department prescribes  
121 and satisfactory evidence of continuing compliance with requirements  
122 established under section 19a-495. In the case of an institution, as  
123 defined in subsection (d) of section 19a-490, that is also certified as a  
124 provider under the Medicare program, the license shall be issued for a  
125 period not to exceed three years, to run concurrently with the  
126 certification period. [Each] Except in the case of a multi-care  
127 institution, each license shall be issued only for the premises and  
128 persons named in the application. [and] Such license shall not be  
129 transferable or assignable. Licenses shall be posted in a conspicuous  
130 place in the licensed premises.

131 (b) (1) A nursing home license may be renewed biennially after (A)  
132 an unscheduled inspection conducted by the department, (B)  
133 submission of the information required by section 19a-491a, and (C)  
134 submission of evidence satisfactory to the department that the nursing  
135 home is in compliance with the provisions of this chapter, the Public  
136 Health Code and licensing regulations.

137 (2) Any change in the ownership of a facility or institution, as  
138 defined in subsection (c) of section 19a-490, owned by an individual,  
139 partnership or association or the change in ownership or beneficial  
140 ownership of ten per cent or more of the stock of a corporation which

owns, conducts, operates or maintains such facility or institution, shall be subject to prior approval of the department after a scheduled inspection of such facility or institution is conducted by the department, provided such approval shall be conditioned upon a showing by such facility or institution to the commissioner that it has complied with all requirements of this chapter, the regulations relating to licensure and all applicable requirements of the Public Health Code. Any such change in ownership or beneficial ownership resulting in a transfer to a person related by blood or marriage to such an owner or beneficial owner shall not be subject to prior approval of the department unless: (A) Ownership or beneficial ownership of ten per cent or more of the stock of a corporation, partnership or association which owns, conducts, operates or maintains more than one facility or institution is transferred; (B) ownership or beneficial ownership is transferred in more than one facility or institution; or (C) the facility or institution is the subject of a pending complaint, investigation or licensure action. If the facility or institution is not in compliance, the commissioner may require the new owner to sign a consent order providing reasonable assurances that the violations shall be corrected within a specified period of time. Notice of any such proposed change of ownership shall be given to the department at least ninety days prior to the effective date of such proposed change. For the purposes of this subdivision, "a person related by blood or marriage" means a parent, spouse, child, brother, sister, aunt, uncle, niece or nephew. For the purposes of this subdivision, a change in the legal form of the ownership entity, including, but not limited to, changes from a corporation to a limited liability company, a partnership to a limited liability partnership, a sole proprietorship to a corporation and similar changes, shall not be considered a change of ownership if the beneficial ownership remains unchanged and the owner provides such information regarding the change to the department as may be required by the department in order to properly identify the current status of ownership and beneficial ownership of the facility or institution. For the purposes of this subdivision, a public offering of the stock of any corporation that owns, conducts, operates or

176 maintains any such facility or institution shall not be considered a  
177 change in ownership or beneficial ownership of such facility or  
178 institution if the licensee and the officers and directors of such  
179 corporation remain unchanged, such public offering cannot result in  
180 an individual or entity owning ten per cent or more of the stock of  
181 such corporation, and the owner provides such information to the  
182 department as may be required by the department in order to properly  
183 identify the current status of ownership and beneficial ownership of  
184 the facility or institution.

185 (c) (1) A multi-care institution may, under the terms of such license,  
186 provide behavioral health services or substance use disorder treatment  
187 services on the premises of more than one facility, at a satellite unit or  
188 at another location outside of its facilities or satellite units that is  
189 acceptable to the patient receiving services and is consistent with the  
190 patient's assessment and treatment plan.

191 (2) Any multi-care institution that intends to offer services at a  
192 satellite unit or other location outside of its facilities or satellite units,  
193 shall submit an application for approval to offer services at such  
194 location to the Department of Public Health. Such application shall be  
195 submitted on a form and in the manner prescribed by the  
196 Commissioner of Public Health. Not later than forty-five days after  
197 receipt of such application, the commissioner shall notify the multi-  
198 care institution of the approval or denial of such application. If the  
199 satellite unit or other location is approved, that satellite unit or location  
200 shall be deemed to be licensed in accordance with section 19a-493 and  
201 shall comply with the applicable requirements of chapter 368v and  
202 regulations adopted under said chapter.

203 (3) The Commissioner of Public Health may adopt regulations, in  
204 accordance with the provisions of chapter 54, to carry out the  
205 provisions of this subsection. The Commissioner of Public Health may  
206 implement policies and procedures necessary to administer the  
207 provisions of this subsection while in the process of adopting such  
208 policies and procedures as regulation, provided the commissioner

209 prints notice of intent to adopt regulations in the Connecticut Law  
210 Journal not later than twenty days after the date of implementation.  
211 Policies and procedures implemented pursuant to this section shall be  
212 valid until the time final regulations are adopted."

This act shall take effect as follows and shall amend the following sections:		
Section 1	October 1, 2014	19a-490
Sec. 2	October 1, 2014	19a-493